

SECTION I:
FFY2016 GOALS AND OBJECTIVES PROGRESS REPORT

FFY 2016 WIC GOALS AND OBJECTIVES PROGRESS REPORT

VENDOR MANAGEMENT

GOAL 1: TO DETECT, CONTROL AND MINIMIZE IMPROPER VENDOR PRACTICES AND IMPROVE PROGRAM REVIEW.

OBJECTIVE 1.1

By September 30, 2016, continue to monitor and review the integrity of the food delivery system.

ACTIVITIES:

- 1) Develop tools to help minimize the number of vendor complaints and help participants advocate for themselves when purchasing food items using WIC checks.
- 2) Continue to monitor banking processes to assure edits are being completed as indicated in contract.
- 3) Continue to Monitor Vendor activities through education and compliance buy processes.

Progress:

Activity 1) Developed complaint flow chart and form for use in clinic sites to track complaints.

Activity 2) Ongoing activity continue to work with the bank to improve process.

Activity 3) Ongoing through the use of our Compliance contractor and Retail coordinator.

NUTRITION SERVICES

GOAL 2: TO EXPAND AND IMPROVE THE QUALITY OF NUTRITION EDUCATION TO MEET THE SPECIFIC NUTRITIONAL NEEDS OF INDIVIDUAL PARTICIPANTS AND SPECIAL POPULATIONS.

OBJECTIVE 2.1

By September 2016, Enhance and monitor efforts to expand, promote and support breastfeeding. Develop a new Pregnancy Nutrition Survey Surveillance report for South Dakota using our new SDWIC-IT data system and working in conjunction with Michigan to analyze data.

Target Breastfeeding Rates:

Breastfeeding Initiation – 62%

Breastfed at 6 Months – 24%

Breastfed at 12 Months – 12%

Progress:

The Breastfeeding Initiation and Duration Report outline breastfeeding rates from January 2015 through December 2015. Breastfeeding initiation rate was 67%, Breastfed at 6 months was 20%

and Breastfed at 12 months was 0%. It has been identified that the breastfeeding duration at 12 months is not being captured at C1 certifications.

ACTIVITIES:

- 1) Continue to monitor South Dakota's breastfeeding rates and compare to national targets and rates using the following sources: a) Healthy People 2020 Goals and Objectives; b) CDC Breastfeeding Report Card; c) PNSS and PedNSS data
- 2) Continue to provide education to clinic staff to increase competency of breastfeeding and encouragement of breastfeeding for all participants.
- 3) Continue to promote usage of a breastfeeding toolkit within hospitals and businesses to educate physicians and employers on the benefits of breastfeeding.
- 4) Continue to encourage use of breastfeeding support groups and post-partum phone calls to provide anticipatory guidance, realistic information, shared experience, and personalized support.
- 5) Continue to coordinate services with the Office of Health Promotion and the South Dakota Breastfeeding Coalition to increase awareness of breastfeeding benefits.
- 6) Work with Michigan to develop PedNSS and PNSS data to utilize for program evaluation purposes.

Progress:

Activity 1) The SD DOH Strategic Plan includes Goal 2: Support life-long health for South Dakotans, Key Performance Indicator 2. Increase the proportion of mothers who breastfeed their baby at least 6 months from 45.6% in 2014 to 60.6% by 2020. This is South Dakota specific data monitored

Activity 2) In July 2016 we had 40 WIC staff who participated in Certified Lactation Counselor training. Held our Annual Breastfeeding Training in August of 2015 for all WIC staff.

Activity 3 & 5) WIC, along with the SD Office of Chronic Disease Prevention and Health Promotion, has been participating in a statewide initiative to promote breastfeeding friendly businesses and communities and promote breastfeeding as a "non-event". As a result of this, the breastfeeding friendly business toolkit was updated. Toolkits are being sent to businesses requesting information or pledging their business as breastfeeding friendly. Physicians packets are available and provided to physician through local WIC offices.

Activity 4) WIC staff continues to refer clients to local breastfeeding support groups and to communicate with participants via phone as needed for breastfeeding support.

Activity 6) Ongoing

OBJECTIVE 2.2

Evaluate Growing Up Together and the Breastfeeding Peer Counseling Program in SD to increase breastfeeding initiation and duration.

ACTIVITIES:

- 1) Assess local agency staff understanding of the peer counselor program and protocols for referrals to peer counselors, providing guidance as needed.
- 2) Solicit and review feedback from current breastfeeding peer counselor staff on training and program support needs should the program expand for statewide services.
- 3) Evaluate effectiveness of the UTAH BFPC Program through WIChealth.org to determine cost effectiveness and if this would meet the needs of South Dakota utilizing the current BFPC's in South Dakota to provide this service.

Progress:

Activity 1) Assessment occurred throughout the last year. It was determined that we need educate our staff on how to utilize BFPC services in the areas that we have an established program.

Activity 2) Training needs have been identified and training is now focused on specific areas of need.

Activity 3) A demonstration of this program was completed for both central office and BFPC's following this we have identified we would like to pilot this program in Mitchell.

Breastfeeding Peer Counseling Annual Report

Over the past year, the Breastfeeding Peer Counseling Program services were delivered through 6 clinic sites. Total contact includes:

Phone	Face to Face	Hospital	Mailed Information	Breastfeeding Classes
1931	543	14	1549	82

The total hours provided through these 6 sites was 2789.5 hours of service. The current Clinic sites that services are being delivered through include: Aberdeen, Sisseton, Mitchell, Brookings, Hot Springs and Belle Fourche. The program has assisted with outreach activities and helped to increase initiation rates for breastfeeding. In addition, the program has helped participants to be more willing and successful in fully breastfeeding.

OBJECTIVE 2.3

By September 30, 2016, improve statewide follow-up nutrition counseling show rates to 80% or better.

ACTIVITIES:

- 1) Implement mentoring program for Participant Centered Services (PCS) approach to improve effectiveness and appreciation of nutrition appointments.
- 2) Update and provide ongoing training to Nurse –Nutrition Educators (Para Professional Training) to allow low risk counseling.
- 3) Provide training to new clinic staff on use of PCS within an electronic environment.
- 4) Promote WIC as a Nutrition Program to help increase the value of nutrition education appointments for participants.
- 5) Monitor the effectiveness of wichealth.org - online nutrition counseling for low risk clients.
- 6) Monitor and track show rates monthly in SDWIC-IT.
- 7) Offer more group counseling to low-risk clients in order to ensure dietitians are more available to counsel high-risk clients.

Progress:

Activity 1) Establishing a mentoring program has been discussed and will be worked on as a future goal.

Activity 2) Providing ongoing training and working on editing Colorado's information for use in South Dakota.

Activity 3) PCS training is part of new client orientation.

Activity 4) According to the 2015 SD WIC Annual Report, 53% of clients who completed the Participant Survey reported the area their family benefited the most from since starting WIC was a better understanding of nutrition. Local staff is also providing information to clients on the purpose of WIC as a nutrition program.

Activity 5) According to the 2015 SD Participant Survey, 57% of participants reported being offered online nutrition education. Training for staff on how to implement wichealth.org was provided at a training session for nutrition professionals in September 2015 as well as via the bimonthly phone call for all CPA staff in May 2016.

Activity 6) Show rates are reported by clinic staff through monthly reporting to state office staff. Show rates are also evaluated at management evaluations of clinics. Corrective action is discussed with local staff if show rates are outside of required parameters.

Activity 7) State staff is working with local agencies to help them promote group nutrition counseling.

OBJECTIVE 2.4

By September 30, 2016, enhance efforts and assure provision of information and referral procedures for alcohol, drugs and other harmful substances to the clinics.

ACTIVITIES:

- 1) Continue to coordinate tobacco prevention and cessation training and promotion with the DOH tobacco program and other programs in the Department to decrease from 15.3% to 15% the number of women enrolled in WIC who smoked while pregnant.
 - SDWIC IT total pregnant women was 1,771 with a total pregnant women that had a risk code of 371 Maternal Smoking was 540 = 30% Pregnant Women smoking.
- 2) Enhancements to SDWIC-IT nutritional assessment questions to be more VENA compliant per Federal Management Review recommendations.

Progress

Activity 1:

Activity 2: The VENA – SDWIC-IT committee reviewed the medical and nutrition assessment questions. These questions will be finalized within the SDWIC-IT system as a future goal.

OBJECTIVE 2.5

By September 30, 2016, continue coordination of services to improve overall health of WIC Participants.

ACTIVITIES:

- 1) Continue to coordination with the HealthySD Stakeholders and Food and Nutrition Coordinating Committee.
- 2) Coordination with SDSU Extension Snap-Ed plan to offer some of our WIC clinics quantities of the “Pick it Try it Like it” cards to give out and make available recipe demonstration videos.
- 3) Continue to monitor the number of infants and children receiving risk codes related to overweight and obesity.
- 4) Provide additional training specific to counseling of overweight children and physical activity strategies for overweight children.
- 5) Work with other Nutrition Assistance Programs to submit a grant application to assist in the development of strategies to improve coordination among USDA FNS Child Nutrition and other Nutrition Assistance Programs focusing on identified poor rule counties with low income with the expected result of improved participation rates.

MANAGEMENT INFORMATION SERVICES

GOAL 3: TO ENSURE APPROPRIATE MANAGEMENT INFORMATION SYSTEMS ARE IN PLACE FOR COLLECTION AND REPORTING OF DATA AND PROGRAM OPERATIONS TO SATISFY FEDERAL REPORTING REQUIREMENTS, TO IMPROVE THE ADMINISTRATION OF THE PROGRAM AT BOTH THE STATE AND LOCAL LEVEL AND TO INCREASE THE OPERATIONAL EFFICIENCY OF THE PROGRAM.

OBJECTIVE 3.1

September 30, 2016, continue the maintenance and operations phase of the SDWIC-IT system of the current contractual agreement with Three Sigma Software, Inc.

ACTIVITIES:

- 1) Provide ongoing training for SDWIC-IT current employees.
- 2) Provide orientation and training to all new employees.
- 3) Continue to tweak the system as need to fix bugs and improve the system with new federal regulations and identified enhancements.

Progress:

Activity 1) Currently we are providing regular training through monthly calls and as modification occur providing training. Updates are completed through Memorandums.

Activity 2) Orientation Training occurs for all new employees prior to providing WIC Services.

This is completed through the Central Office staff and a training facility is available in Pierre, SD.

Activity 3) Several enhancements have been completed this past year. The system was updated to IE10:

- Editable pdf breast pump release forms

- Transferred the food check lookup screen from the admin module to the clinic module

- Validation of food instruments

- RD approval and direct issued formula inventory

- IE 10/11 compatibility of SDWIC-IT – clinic, admin, food and finance modules

- IE 10/11 compatibility of SDWIC-IT vendor module

- Maintain Management Evaluation questions

- Health insurance report by category

- Risk factors

- Food package customization

- Several additional enhancements have been identified from staff working in the SDWIC-IT system

GOAL 4: MOVE TOWARD A MORE CONFIDENTIAL AND EFFICIENT MEANS FOR THE DELIVERY OF SUPPLEMENTAL FOODS

OBJECTIVE 4.1

By September 30, 2016, start the implementation process of an online EBT system.

- 1) Continue to utilize SDWIC-IT to collect UPC information and for maintenance of price collection and Peer Group averages.

- 2) Prior to EBT implementation, ensure entry of all PLU information.
- 3) Hire EBT specialist to work with program staff through the EBT implementation process.
- 4) Continue negotiations with SD SNAP Program and FIS to secure online EBT contractual services.
- 5) Secure funding to proceed with implementation process.

Progress:

- Activity 1) Ongoing activity and working to update and reflect National UPC database.
- Activity 2) PLU's have been entered, but due to retailers using various systems to identify fresh fruits and vegetables we will be continually updating and monitoring PLU's.
- Activity 3) EBT specialist was hired and has been working on the project since December 2016.
- Activity 4) This was completed and contract effective in April, 2016.
- Activity 5) Funding was secured to fully fund the implementation process.

OBJECTIVE 4.2

By September 30, 2017, statewide implementation of EBT

- 1) Design, develop and prepare for EBT implementation.
- 2) Pilot EBT in clinics and vendors by the end of March 2017.

Progress:

Activity 1 and 2) Held kickoff meeting in April of 2016. To date have created card design training brochure. Provided EBT status meeting with vendors, scheduled vendor webinars for July 13, for all vendors, completed project plan with timelines. Anticipate UAT for completion in September with pilot occurring by mid - October, 2016.

STAFFING AND ORGANIZATION

GOAL 5: TO ASSURE A FUNCTIONAL ORGANIZATION AND ADEQUATE RESOURCES TO CARRYOUT PROGRAM OPERATIONS AND DELIVER SERVICES TO THE WIC POPULATION.

OBJECTIVE 5.1

By September 30, 2016, continue to review the current make-up of WIC within the Office of Family and Community Health Services and how services are delivered through the clinics with special focus Nutrition Services.

ACTIVITIES:

- 1) Continue to review staffing ratio information in conjunction with new SDWIC-IT system.
- 2) Continue to coordinate with the Regional Managers and Office Administrator to meet multiple programs needs to deliver WIC services and meet staffing standards with involvement of nutrition staff in all aspects of WIC.
- 3) Continue to review clinic caseload information and time spent providing services to participants for most efficient delivery system within the new SDWIC-IT environment.
- 4) Utilize the a new staffing ratio system based on appointment times to determine appropriate staffing needs to cover WIC services.

Progress:

Activity 1 and 4: Developed system of staffing ratio analysis based on appointment times to more accurately reflect staffing needs.

Activity 2: Working on a continuing basis to improve services while maintaining a one stop shopping approach.

Activity 3: Reviewing time study guidance for proper coding of 100% of time.

STATE OFFICE AND CLINIC STAFF TRAINING

GOAL 6: TO ENSURE COMPREHENSIVE TRAINING AVAILABILITY FOR ALL STAFF ASSOCIATED WITH THE DELIVERY OF WIC SERVICES.

OBJECTIVE 6.1

By September 30, 2016, strengthen the techniques used for delivery of nutrition education to meet the participant needs.

ACTIVITIES:

- 1) Develop mentoring program for all CPA staff on the use of updated nutrition education materials, and appropriate counseling techniques to further involve WIC participants as active partners in WIC assessment and care plan development.
- 2) Continue to consider various cultures within South Dakota including, but not limited to migrant farm workers and their families, Native Americans, and homeless persons in the development of education materials and counseling techniques.
- 3) Continue to develop nutrition messages and presentations to be displayed on monitor screens in waiting rooms.
- 4) Tele Nutrition Education. Pilot in 4 clinics statewide.

Progress:

Activity 1: Due to nutrition staff turnover this activity has not been accomplished to date. We will continue to keep this as a future goal.

Activity 2: Ongoing activity All revised and new brochures are translated into additional languages i.e. Karen and Spanish. 2016 Food Guide was translated into Karen.

Activity 3: This has not been accomplished for various reasons. We are now evaluating how to better utilize social media for nutrition education purposes.

Activity 4: We have made some progress in this area. We have purchased the equipment have assigned to the pilot sites of Lemmon and Sisseton now working with our IT staff on functionality and appropriate software to use for communication purposes.

OBJECTIVE 6.2

By September 30, 2016, provide WIC Program policy updates & training to clinic staff.

ACTIVITIES:

- 1) Develop Nutrition and Resource training manuals adapted for South Dakota from the Colorado WIC Program.

- 2) Continue to utilize Management Evaluation Findings Summary to determine training needs.
- 3) Develop ongoing Paraprofessional training for nursing staff to provide nutrition education to low-risk participants.

Progress:

Activity 1: This is in process about 50% has been completed to date.

Activity 2: This is an ongoing process.

Activity 3: Have developed para-professional training and continue to improve training.

OBJECTIVE 6.3

By September 30, 2015, enhance staff awareness of Civil Rights rules and regulations.

ACTIVITIES:

- 1) Continue annual Civil Rights training for all staff and evaluate staff understanding and adherence of Civil Rights policies in conjunction with Management Evaluations.

Progress: Civil Rights training mandatory for all staff in December and January each year and new staff as applicable.

NUTRITION SERVICES AND ADMINISTRATION EXPENDITURES

GOAL 7: TO MAINTAIN INTEGRITY IN MANAGEMENT OF ADMIN AND NUTRITION SERVICES FUNDS AND ALLOCATION OF WIC RESOURCES.

OBJECTIVE 7.1

By September 30, 2016, continue to assure that the method of allocation of WIC resources are in compliance with federal reporting and applicable to principles of cost allocations.

ACTIVITIES:

- 1) Continue to monitor and assure appropriate costs are charged to the WIC grant and that program costs are fairly shared in integrated systems.
- 2) Continue to review and monitor clinic operations, staffing and appropriate management practices through review of time study information, operations, staffing, and management practices.
- 3) Continue to monitor county and alliance contracts to assure resources are still needed and expenditures are allocated appropriately.

FOOD FUNDS MANAGEMENT

GOAL 8: TO MAINTAIN INTEGRITY OF MANAGEMENT OF FOOD FUNDS WITHIN BUDGET ALLOTMENTS AND TO ENHANCE QUALITY ASSURANCE AND COMPLIANCE OF POLICIES IN THE FOOD DELIVERY COMPONENT THROUGH PROPER ADMINISTRATION OVERSIGHT AND EDUCATION TO STAFF AND PARTICIPANTS AND RETAILERS.

OBJECTIVE 8.1

By September 30, 2016, monitor food packages costs for use in the selection of acceptable foods and food funds management.

ACTIVITIES:

- 1) Continue to track specified food costs and expenditures through vendor food price entries, cost per participant, projections, etc. in determining caseload management with food funds to allow for food package management and changes as necessary.
- 2) Continue to gather data for more accurate review and analysis of cost and availability of WIC acceptable foods using system output reports and retailer surveys.
- 3) Continue to analyze price lists against peer group averages and notify retailers of foods that exceed maximums.
- 4) Monitor food inflation on a monthly basis.

Progress: All Activities are monitored on a monthly basis and adjusted as needed.

CASELOAD MANAGEMENT

GOAL 9: TO ENSURE PROGRAM BENEFITS ARE PROVIDED TO ELIGIBLE PERSONS.

OBJECTIVE 9.2

By September 30, 2016, enhance outreach in an attempt to reach all eligible participants, with the main focus on pregnant women early in their pregnancy.

ACTIVITIES:

- 1) Continue to market WIC on the Clinic level, utilizing the SDWIC-IT NEMP Needs Assessment report developed annually for the Nutrition Education and Marketing Plans. Meet the following statewide marketing goals:
 - Increase to 45% (less than 8 weeks) or 55% (between 8 and 20 weeks) of pregnant women receive WIC services early in their pregnancy
 - Strive to meet 75% of the potential eligible in each county
 - Increase the total statewide caseload by 12%
 - Address Participant Survey concerns
- 2) Develop a child retention media campaign with particular focus on social media and retention of infants turning to children.
- 3) Participate in the National WIC Association Social Media Campaign for Child Retention and increase program participation.

- 4) Continue to target pediatrician offices and medical clinics to promote WIC program services and highlight benefits.
- 5) Continue to utilize press releases quarterly to market the WIC Program
 - reaching out to pregnant women
 - targeting dads of WIC eligible children
 - announcing new income guidelines
 - reaching out to ranching and farming families informing them U.S. Department of Agriculture funds the WIC Program
- 6) Continue to utilize data collected from SDWIC-IT, Management Evaluations and Nutrition Education and Marketing Plans to determine individual county needs for outreach and for more efficient and effective case management practices.

Progress:

Activity1: Continues and all goals and objectives are reviewed quarterly in the clinic environment and completed annually based on a state fiscal year. ADD IN NEW PERCENTAGES

Activity 2: Media campaign was awarded to Epicosity in February of 2016. Developed new WIC Logo and working on improving marketing materials.

Activity 3: SD was interviewed to get a better handle on the issues with child retention and the population served by SD.

Activity 4: Marketing efforts are happening at the State Level

Activity 5: Press releases are developed and available for use in the clinics for local advertising.

Activity 6: Currently using Needs Assessment data from SDWIC-It, Vital Statistics, PRAMS data, School Height and Weight Report, SD Youth Risk Behavior Survey

ELIGIBILITY/CERTIFICATION AND COORDINATION OF SERVICES

GOAL 10: TO ASSURE DETERMINATION OF ELIGIBILITY AND PROVISION OF BENEFITS ARE DELIVERED EFFICIENTLY, APPROPRIATELY, AND CONVENIENTLY TO THE PARTICIPANT AND TO ENHANCE COORDINATION OF ACTIVITIES WITH OTHER HEALTH SERVICES.

OBJECTIVE 10.1

By September 30, 2016, continue coordination and collaboration with other community-based health services and State/Federal agencies.

ACTIVITIES:

- 1) Continue to coordinate with the DOH Immunization program, Disease Prevention, and Department of Social Services to maintain or improve referrals between programs and for the health protection of the participants served.
- 2) Continue referral and eligibility coordination with Maternal and Child Health, Bright Start, Baby Care, Health KiCC, Newborn Metabolic Program, Family Planning and Head Start/Early Head Start. Continue to coordinate joint projects when possible.
- 3) Continue to coordinate services to obtain common goals with the Department of Health to meet 2020 goals.

Progress:

Activity 1: Collaboration efforts have increased over the past year with all entities listed above including additional work with Office of Chronic Disease Prevention and Health Promotion.

Regular meetings now occur, several joint projects have occurred.

Activity 2: Have updated MOU with all entities included above.

Activity 3: Our Office of Child and Family Service has now developed a Strategic Plan that incorporates the DOH 2020 goals. Within the OCFS Strategic Plan the WIC Program's goals for breastfeeding, childhood obesity, Pregnant women WIC visits prior to 8 weeks and 20 weeks, decrease pregnant women smoking

OBJECTIVE 10.2

By September 30, 2016, continue collaborative efforts between the Tribal Indian WIC Agencies, the six bordering states, and the SD WIC program.

ACTIVITIES:

- 1) Continue collaborative efforts in sharing information to detect and prevent dual participation.
- 2) Continue ongoing networking between these entities to enhance services to citizens of the state in overlapping areas that may include working together on special projects including WIC, ITO, and bordering states.
- 3) Continue to collaborate jointly on policies and procedures and implementation of new federal regulations.

Progress:

Activity 1: We have dual participation agreements with all ITO's within and surrounding SDWIC. In addition we work with them on an annual basis to provide statistical information for potential eligible participants to be served.

Activity 2: We have dual participation agreements with surrounding state agencies and have recently secured funding to support PedNSS and PNSS data analysis for the entire Mt. Plains Region. This will go into effect in 2017.

Activity 3: Several new policies and revisions occurred throughout the year including income, discrimination, eligibility and nutrition risk revision.

OBJECTIVE 10.3

By September 30, 2016, continue to utilize/update current program misuse policies to ensure program integrity.

ACTIVITIES:

- 1) Continue to decrease misuse by summarizing the frequency and types of misuse being reported to look for patterns of misuse and train staff on specific misuse problems during Management Evaluations.
- 2) Continue to educate clients, staff & vendors regarding requirements of the program to deter fraud & abuse.
- 3) Manage client complaints/misuse through SDWIC-IT system.
- 4) Assure corrective action responses resulting from ME reviews are implemented by clinic staff and monitored by Regional Managers to assure continued compliance.

Progress: All four activities are ongoing. Reviews take place monthly and resolution is attempted to occur as soon as possible.

Progress:
Activity 1:

OBJECTIVE 10.4

By September 30, 2016, review all eligibility policies to assure compliance with federal regulations.

ACTIVITIES:

- 1) Review current state policy and procedure against current federal regulations to assure full compliance with participant eligibility requirements.
- 2) Update SDWIC-IT system income eligibility section with additional edits to assure complete and accurate accounting of proof of income and income calculations.

Progress:

Activity 1: Most of the review has been completed and we did have our Federal ME completed with few findings. We are working to update policy and procedure to assure compliance.

Activity 2: Income proof must now be scanned into SDWIC-IT. Income calculation policy was updated and we have identified the modification necessary to for the calculation of the income guidelines within SDWiC-IT.